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PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031

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10/789.065 Application Number Filing Date February 27, 2004 TRANSMITTAL First Named Inventor Moses A. Lipshaw, et al. **FORM** Art Unit 3743 (to be used for all correspondence after initial filing) **Examiner Name** Henry Bennett Attorney Docket Number CAID 1019480 ચંબ Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)							
X Fee Transmittal Form Fee Attached X Amendment/Reply After Final Affidavits/declaration(s) X Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter X Other Enclosure(s) (please Identify below): postcard					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Gordon & Rees LLP Signature Printed name Harris F. Brotman Date November 1, 2005 Reg. No. 35,461 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on							
the date shown below. Signature	Farrell						
Typed or printed name Linda A. Farrell		Date 11/01/2005					

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2)
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And I	Effective on 12/08/2004. Fees As Jant to the Consolidated Appropriations Act, 2005 (H.R. 4818)				
. (8	FEE TRANSMITTAL				

for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)500.00

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Application Number	10/789,065	
Filing Date	02/27/2004	
First Named Inventor	Moses A. Lipshaw et al.	
Examiner Name	Henry Bennett	
Art Unit	3743	
Attorney Docket No.	CAID 1019480	$\overline{}$

METHOD OF PAYMEN	METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):									
Deposit Account Deposit Account Number: 501990 Deposit Account Name: Gordon & Rees LLP									
For the above-ide	ntified deposit	account, the Di	rector is hereby at	uthorized to: (che	ck all that appl	y)			
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under 37 CFF WARNING: Information on t	R 1.16 and 1.1° his form may b		ــ redit card informati			form. Provide cre	dit card		
information and authorization									
FEE CALCULATION									
1. BASIC FILING, SEA									
	FILING F		SEARCH F		EXAMINA	ATION FEES			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100	10001 010 (0)		
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80	-		
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0	·········		
2. EXCESS CLAIM FE	ES		-	_	•	•	mall Entity		
Fee Description					Fee (\$)	Fee (\$)			
Each claim over 20 (in						50	25		
Each independent clain		luding Reissu	es)			200	100		
Multiple dependent cla Total Claims	ıms Extra Cla	ime For	(\$) Fees Pa	id (\$)		360 Multiple Dene	180 endent Claims		
28 - 20 or HF		× 25	= 200.00			Fee (\$)	Fee Paid (\$)		
HP = highest number of total of	claims paid for, if	greater than 20							
Indep. Claims	Extra Cla		(\$) Fees Pa	id (\$)					
6 - 3 or HP		<u> </u>	<u> </u>						
HP = highest number of independent claims paid for, if greater than 3									
3. APPLICATION SIZE FEE									
	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	xtra Sheets		ber of each addi			Fee (\$)	Fee Paid (\$)		
- 100 =		/50=	(round	up to a whole nu	mber) x				
						Fee Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge):									
Other (e.g., late III	ing suicharge	· J							

SUBMITTED BY Signature Registration No. 35,461 Telephone 619 696-6700 (Attorney/Agent) Name (Print/Type) Harris F Brotman Date November 1, 2005

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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